YUKON

HEALTH AND SOCIAL SERVICES

COUNCIL

2010 - 2011
ANNUAL REPORT

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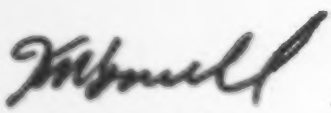
MESSAGE FROM THE CHAIR

"The Health and Social Services Council shall, no later than June 30 of each year, provide the Minister with an annual report containing a summary of its activities, deliberations, and recommendations during the preceding year. On receiving the report, the Minister shall lay a copy of it before the Legislative Assembly during the session then in progress or the next session". S.31, Health Act, (Yukon)

This annual report outlines activities undertaken by the Health and Social Services Council (the Council) in 2010-2011 in its efforts to meet its legislated mandate in working collaboratively with interest groups, agencies, government and the public at large to improve the health of Yukoners.

The assistance and dedication of all the members of this Council and to those who supported the Council in its work is appreciated. Thank you to all of you.

Sincerely,



Kevin McDonnell
Chair

SUMMARY OF COUNCIL ACTIVITIES

The Council held 4 meetings during 2010 – 2011: May 14 & 15, 2010; August 6 & 7, 2010, October 8 & 9, 2010; and March 4 & 5, 2011. A summary of its deliberations during these meetings is below.

In April 2010 the Chair de-briefed Minister Hart and his Executive Assistant on Council activities.

The Councils Communications sub-committee continued to work on developing a Council communication plan. The Council's website was updated with the posting of the Council's updated terms of reference, operating procedures and mission statement.

DELIBERATIONS

The Council received an update from the Department of Health and Social Services on the Territorial Health Access Fund and the Territorial Health System Sustainability Initiative. The Council was advised that the Department did not require its input regarding the allocation of funds.

Staff from the Department of Health and Social Services briefed the Council on the New *Children's and Family Services Act*.

The Council updated its Terms of Reference, Mission Statement and Operating Procedures.

The Council met with a communications expert from the Department of Health and Social Services to discuss how a communication strategy for the Council might look. The Council reviewed what its communication goals might be, its target audience and the key messages it might convey. One step the Council took to improve its communications was to post its updated terms of reference, operating procedures and mission statement on its website.

The Council continued to monitor actions taken by government to better utilize the Thompson Centre. Council was advised by the Department of Health and Social Services that 19 new beds will be opened at the Centre.

The Council received presentations on land based treatment centers and healing camps. It received information on the newly commissioned Jackson Lake Land Based Treatment Centre. Council members also toured the facility. The Council was advised that the Kwanlin dun First Nation would be submitting a proposal to government for funding to continue with the program.

The Council wrote to the Minister of Health and Social Services noting their support for innovative approaches to addressing social issues such as the Jackson Lake Land Based Healing Camp (see Attachments: October 21, 2010 letter to Minister Hart Re: Health and Social Services Council Recommendation – Continuing Support for Jackson Lake Land Based Healing Camp). The Council made a number of suggestions for the Minister to consider when reviewing the proposal. The Minister responded that the government recognizes the very serious problems caused by substance abuse and that he appreciated the Council's suggestions.

The Council created a table describing preventative, treatment and aftercare programs for acutely intoxicated persons at risk. The table included purpose, entry requirements, challenges with the program and how the program is evaluated for success. The Council felt this table will be useful to understanding the existing suite of programs, their linkages and suggest areas for improvement.

The Council continued to look into the issue of the adequacy of public emergency notification procedures. It made suggestions to the Emergency Measures Organization on how it may improve public notification.

The Council deliberated on the issue of whether patients from the communities medevaced to Whitehorse hospital and then discharged from the hospital after hours receive the necessary support when they are discharged. The Council recommended to the Minister that there should be protocols and procedures for hospital staff so that clients have accommodations and arrangements for returning home when released from hospital after hours (See Attachments: October 21, 2010 letter to Minister Hart re: Health and Social Services Council Recommendation – Ensuring Medevaced Outpatients Released from Hospital Receive Assistance if Required). The Council also recommended that there be a sign posted at an appropriate location inviting clients to seek assistance if they need it.

The Minister responded to the Council's recommendation by noting that hospital staff develop discharge plans for patients once they are cleared to leave the facility. The Minister noted that every effort will be made to ensure that there are no issues arising from community patients being discharged after hours.

Department of Health and Social Services staff briefed the Council on the Prevention and Treatment Programs, Communities Outreach Programs, and Detoxification Program Best Practices on Prevention and Treatment.

The Council worked with the Department of Health and Social Services to develop a Summary of Prevention/Health Promotion Programs in Health and Social Services. The Council felt that such an inventory of programs would be useful a useful reference when the Council or others are looking into an issue.

The Council received an update from the Department of Health and Social Services on its Wellness Strategy Initiative.

An official from the Department of Health and Social Services presented to the Council information on the Standards and Evaluation Program at Alcohol and Drug Services. The Council also received a presentation on the Social Inclusion Conference and Strategic Social Initiatives.

The Council deliberated on the issue of the number of different initiatives being undertaken by the Department of Health and Social Services such as: intoxicated persons at risk, wellness, aging well and social inclusion and poverty reduction. The Council issued a recommendation that government review the respective programs objectives, approaches and outcomes to identify potential overlaps and areas for improved coordination (see Attachments: October 21, 2010 letter to Minister Hart re: Health and Social Services Council Recommendation – Coordinating Government Health and Social Services Initiatives).

The Council received a presentation from the Task Force on Acutely Intoxicated Persons at Risk. It deliberated on the issue and made recommendations to the Task Force on issues it may wish to consider (See Attachments: October 22, 2010 Council letter to Mr. James Allen and Dr. Bruce Beaton re: Follow-up to Health and Social Services Council Presentation on Task Force on Acutely Intoxicated Persons at Risk).

The Council was briefed by the Six Steps to Success Conference coordinator regarding the purpose and details for the upcoming conference.

The Council deliberated on the issue of Fetal Alcohol Syndrome in the Communities. It identified this as an issue that might be something the Council would like to investigate further.

The Council received a presentation on the Northern City Housing Project by the team promoting this initiative.

FINANCIAL STATEMENT 2010-11
AS TO MARCH 31, 2011

YUKON HEALTH AND SOCIAL SERVICES COUNCIL

BUDGET:		**$40,000.00**
Honoraria	$15,500.00	
Travel Costs	$5,078.87	
Meeting Expenses	$8,282.48	
TOTAL EXPENDITURES		**$28,861.35**

COUNCIL MEMBERSHIP DURING 2010 - 2011

- Kevin McDonnell – Chair
- Marie Cox (re-appointment November 5, 2010)
- Maxwell Rispin (re-appointment April 1, 2010)
- Douglas MacPheat
- Doug Kearns
- Peter Morawsky (appointed April1,2010)
- Marie Martin (appointed November5, 2010)
- James Allen (resigned December 23, 2010)
- Graham Lang (resigned March 2, 2011)
- Joseph Graham (resigned February 21, 2011)

CONTACT INFORMATION

For information on the Yukon Health and Social Services Council, please contact:

Yukon Health and Social Services Council
Attention: Yukon Health and Social Services Council Secretariat
Box 2703 (H-1)
Whitehorse, Y.T. Y1A 2C6

Phone: (867) 667- 8541 or Toll free: 1-800-661-0408 ext. 8541

Fax: (867) 393-6457

ATTACHMENTS: COUNCIL RECOMMENDATIONS

Yukon Health &
Social Services Council
Box 2703 (ARE)
Whitehorse, Yukon Y1A 2C6

October 21, 2010

Glenn Hart
Minister of Health and Social Services
Box 2703 CM-3
Whitehorse, YT Y1A 2C6

Dear Minister Hart,

RE: Health and Social Services Council Recommendation - *Continuing Support for Jackson Lake Land Based Healing Camp*

One of the functions of the Health and Social Services Council (the Council) pursuant to section 36 of the *Health Act* is to make recommendations to government. The Council has been considering, among other things, the issue of the prevention and treatment of substance abuse.

The Yukon Health and Social Services Council (the Council) received a presentation and tour of the Jackson Lake Land Based Healing Camp. The Council was very impressed with this alternative, non-institutional way to help Kwanlin Dun, other First Nations and non-First Nations heal from issues relating to substance abuse. While the formal evaluation of this pilot project has yet to be completed and submitted, the Council understands that it was very successful and that the Kwanlin Dun will be submitting a proposal for funding to continue with the program.

In anticipation of this submission, the Council recommends that government consider the following suggestions if and when it receives the funding proposal:

- The Council encourages and supports innovative approaches to addressing social issues and is supportive of continuing funding for the Jackson Lake Land Based Healing Camp.
- The Council understands that there have been and continue to exist other traditional detoxification and treatment facilities and that other First Nations are interested in enhancing their traditional treatment approaches. As such, the Council believes that both the First Nation and non-First Nation communities should work together to develop an all-inclusive and holistic Yukon community land based healing program. Such a program would incorporate patient care along the continuum from detoxification, treatment and aftercare. It should make better use of existing facilities and thus see improved efficiencies in the overall treatment program.
- A Yukon wide traditional healing approach should ensure that the Jackson Lake and other land based healing facilities are aligned with government programs to promote efficiency and continuity of treatment programs, and sharing and merging of traditional and modern treatment approaches. Furthermore, during operation of such programs and facilities, consideration should be given to increasing opportunities for the sharing of approaches between Yukon government and First Nation governments. This may include staff secondments between the parties to promote greater understanding and improvement of both approaches.
- The Council understands that the fiscal reality is such that it will be difficult to find funds for new programs without negatively affecting existing programs. However, the Council believes

that the treatment of such social issues as substance abuse should be a collaborative effort between all levels of government and should include the private sector. This would ease the financial burden on any single party. Other stakeholders such as major employers have an impact on social issues in the Yukon and are usually interested in supporting measures that will improve social conditions. They will also benefit from such programs by seeing improvement in the health of the workforce which increases productivity. As such, these stakeholders should be approached and invited to partner in funding. Similarly, private health insurance companies may be willing to contribute funds to innovative treatment approaches, if the end overall result is that there will be a reduction in health insurance claims.

- Consideration should be given to establishing an organization able to issue tax donation receipts to private donors for contributions to land based healing facilities.
- The Council anticipates that costs for continuing with the Jackson Lake land-based healing camp may seem high. It is noted, however, that significant money has already been invested in constructing infrastructure at Jackson Lake. Council is of the view that it would be unfortunate to see the existing facility dismantled for lack of operating funds.
- A process should be established and implemented upfront to evaluate the cost / effectiveness of the land based program in comparison to other modern methods. Where possible, such an evaluation program should be consistent with Yukon government's current efforts to develop performance evaluation standards for its alcohol and drug treatment programs.
- The Council recognizes that accrediting such facilities may increase the credibility of such innovative approaches, thus making it easier for agencies to agree to fund. While the Council encourages the parties to look into the feasibility of accrediting the land based healing camp by an appropriate accreditation agency, the Council also realizes that this may be difficult due to the unique approach being developed, such that there are no existing standards that apply.
- The Council understands that other land based healing programs exist outside of the Yukon. The Council encourages the parties to follow-up with these programs to share information on lessons learned and on potential funding opportunities.

Thank you very much for the opportunity to undertake this important work.

Yours sincerely,

Kevin McDonnell
Chair
YUKON HEALTH & SOCIAL SERVICES COUNCIL

cc. Stuart J. Whitley, QC, Deputy Minister, Health & Social Services
Ms. Jeanie Dendys, Director of Justice, Kwanlin Dun First Nation

Yukon Health & Social Services Council
Box 2703 (A8E)
Whitehorse, Yukon Y1A 2C6

October 21, 2010

Glenn Hart
Minister of Health and Social Services
Box 2703 CM-3
Whitehorse, YT Y1A 2C6

Dear Minister Hart,

RE: Health and Social Services Council Recommendation - Ensuring Medevaced Outpatients Released from Hospital Receive Assistance if Required

One of the functions of the Health and Social Services Council (the Council) pursuant to section 36 of the *Health Act* is to make recommendations to government. The Council has been considering, among other things, the issue of ensuring outpatients who have been medevaced in from the communities and then released from the hospital receive assistance if required.

The Council is aware of situations where rural residents have been medevaced to Whitehorse for medical treatment and have then been released from the hospital after business hours. These outpatients may not have any identification or money with them. As a result, they aren't able to secure food or accommodations for the night, and may have difficulties arranging for travel back home.

The Council understands that it is the hospital's policy to assist outpatients during normal business hours and when requested. Unfortunately, some outpatients may not be aware of the help that would be made available to them if requested. Others may be unable to request assistance unless prompted. As a result of not being aware of the available assistance during business hours, or the lack of after hours assistance, outpatients may become distressed to find themselves on their own, with no id, money and nowhere to sleep for the night.

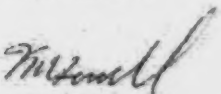
The Council recommends that:

- Hospital staff confirm with clients who have been medevaced in for treatment and are being released, that they have accommodations for the night, as well as arrangements for returning home. There should be protocols and follow-up procedures in the event that clients require assistance. Staff should be aware of the protocols and procedures at all times.

- A sign be posted at an appropriate location advising outpatients that if they require assistance to secure accommodation, or with any other matter, they should ask hospital staff for assistance.

Thank you very much for the opportunity to undertake this important work.

Yours sincerely,



Kevin McDonnell
Chair
YUKON HEALTH & SOCIAL SERVICES COUNCIL

cc. Stuart J. Whitley, QC, Deputy Minister, Health & Social Services
Joe MacGillivray, CEO, Whitehorse General Hospital
Brian Kitchen, Director Policy and Program Development, Health & Social Services

Yukon Health &
Social Services Council
Box 2703 (ABE)
Whitehorse, Yukon Y1A 2C6

October 21, 2010

Glenn Hart
Minister of Health and Social Services
Box 2703 CM-3
Whitehorse, YT Y1A 2C6

Dear Minister Hart,

RE: Health and Social Services Council Recommendation - Coordinating Government Health and Social Services Initiatives

One of the functions of the Health and Social Services Council (the Council) pursuant to section 36 of the *Health Act* is to make recommendations to government. The Council has been considering, among other things, the issue of the coordination of the various government initiatives to improve the Health and Social well being of Yukoners. The Council is very impressed with the government's efforts to review and improve its programs and with the dedication and hard work of your Department's staff.

During the past year, the Council has been informed of a number of government initiatives to improve the health and social conditions for Yukoners. These include the: Task Force on Intoxicated Persons at Risk; Wellness Strategy; Aging Well Strategy; and Social Inclusion and Poverty Reduction Strategy, to name a few.

The Council is concerned that there may be overlap in the matters that each of these initiatives are addressing, as some of their underlying themes appear to be closely related. As such, the Council recommends that the government may wish to review the objectives, approaches and outcomes of these programs to identify overlaps and to consider ways to coordinate the work of these initiatives so as to increase efficiency and effectiveness.

Thank you very much for the opportunity to undertake this important work.

Yours sincerely,

Kevin McDonnell
Chair
YUKON HEALTH & SOCIAL SERVICES COUNCIL

cc. Stuart J. Whitley, QC, Deputy Minister, Health & Social Services

Yukon Health &
Social Services Council
Box 2703 (A8)
Whitehorse, Yukon Y1A 2C6

October 22, 2010

Mr. James Allen, Co-Chair, Task Force on the Acutely Intoxicated Persons at Risk
P.O. Box 2104
Haines Junction, YT Y0B 1L0

Dr. Bruce Beston, Co-Chair, Task Force on the Acutely Intoxicated Persons at Risk
P.O. Box 2064
Marsh Lake, Yukon Y0B 1Y2

Dear Dr. Beston and Mr. Allen,

Re: Follow-up to Health and Social Services Council presentation on Task Force on Acutely Intoxicated Persons at Risk

This is further to your presentation to the Yukon Health and Social Services Council (the Council) regarding the Task Force on Acutely Intoxicated Persons at Risk. The Council appreciates the information you presented and is very interested in supporting the work of the Task Force. Your presentation stimulated much discussion among the Council members and also generated some ideas that we would like to convey to you for your consideration as follows:

- The Council believes it is important to target youth in terms of treatment and aftercare programs. Helping youth now may alleviate the need to treat adults in the future. The Council understands that there are government and non-government youth programs. There may be value in reviewing these programs to ensure they are coordinated so that they are cost-effective and result in optimal services to youth.

- The Task Force might be interested in understanding the decision making process that is used to determine whether intoxicated persons are being put into the drunk tank for liquor act violations, charged under the criminal code, or both. It might be also informative to understand the proportion of people dealt with under either or both processes. This information will be important when developing actions to address detoxification issues.

- The Task Force might also want to consider the specific challenges of dealing with intoxicated persons in the communities, and the differences between the communities in terms of available resources and the specific problems they face.

- There are government and non-government programs dealing with temporary shelter, detoxification, addictions treatment and aftercare. The Task Force may wish to consider how the effectiveness of the programs are evaluated in order to support the allocation of limited resources to the programs and operations with the best value.

- The treatment of persons at risk is a progressive approach, starting with prevention then detoxification, treatment and finally aftercare. It might be worthwhile to describe, from an individual's perspective, their progression through the prevention/treatment/aftercare continuum in order to ensure smooth transition through the system, or conversely to identify gaps that need to be addressed.

- The Council believes that it might be a good idea for program managers and line staff of the various government and non-government alcohol and drug programs to meet on an annual basis to discuss programs, proposed changes, and to identify opportunities for collaboration.

- The Council anticipates that the task force may be making recommendations that government take certain actions. These actions will require resources and there may not be sufficient resources to implement all the Task Force's recommendations at one time. Instead some actions may need to be deferred until resources can be made available. In light of this, the Council suggests that the Task force may wish to prioritize their recommended actions, in order to facilitate government planning and implementation.

- Over the years, the Council has issued recommendations relating to the issue of detoxification and is attaching these recommendations for the Task Force's consideration (see attachment below: *Previous Council Recommendations on Alcohol and Drug Programs*). The Council is attaching these recommendations for the Task Force's consideration.

- The Council understands that there are both government and non-government agencies offering care to affected persons. The Task Force may wish to assess if the agencies have legal and/or operational difficulties sharing client information which may impede the effectiveness of ongoing treatment and care programs.

- The Council received a presentation on the Jackson Lake Land Based Healing Centre and understands that there will be report done on the effectiveness of the program and that this report, or information from this evaluation will be made available. The Task force should consider the success and effectiveness of these types of programs as they consider solutions to the issue of intoxicated persons at risk.

In closing the Council looks forward with interest to the outcomes of your work and wishes you the best of luck as you look into this important issue.

Yours sincerely,

Kevin McDonnell
Chair
YUKON HEALTH & SOCIAL SERVICES COUNCIL

cc. Glenn Hart, Minister of Health and Social Services
Stuart J. Whitley, QC, Deputy Minister, Health & Social Services
Brian Kitchen, Director Policy and Program Development, Health & Social Services